# TEXAS CLEAN FLEET PROGRAM (TCFP) TCEQ-20556 PROJECT APPLICATION INSTRUCTIONS

### **PURPOSE**

These instructions are designed to help applicants complete and submit grant applications to the Texas Commission on Environmental Quality (TCEQ) under the Texas Clean Fleet Program (TCFP). Upon submission, all proposals become the property of the state of Texas and as such become subject to public disclosure under the Texas Public Information Act (PIA), Texas Government Code, Chapter 552.

### 1.0 APPLICATION DOCUMENTS AND TOOLS

To get started with the application, download the following application documents and tools from the TERP website at www.terpgrants.org:

- 1. TCFP Request for Grant Applications (RFGA)
- 2. TCEQ-20556 Project Application Form
- 3. IRS W-9 Form
- 4. TCFP Technical Supplement
- 5. TCFP Grant Estimator

### 2.0 IMPORTANT NOTE TO ALL APPLICANTS

- 1. A **minimum of ten activities** may be submitted per grant application. An activity is the individual replacement of a vehicle.
- 2. Applications must have wet ink (original) signatures where required to avoid being ineligible for a grant. **Photocopies, faxes, scanned copies, or other copies of signature pages will not be accepted.**

# 3.0 HOW TO APPLY

- 1. Review the eligibility requirements outlined in the RFGA.
- **2.** Determine your maximum eligible grant amount using the TCFP Grant Estimator which can be downloaded from the website to your computer.
- 3. Gather information for each new vehicle/engine. You must submit one primary price quote for each new vehicle/engine. Price quotes must be addressed to you and signed by the dealer.
  - If the application contains more than one of the exact same new vehicle/engine, only one price quote is required for that vehicle/engine.

- 4. Complete two copies of the TCEQ-20556 Project Application using the instructions outlined in Section 4.0 below.
- 5. Assemble two sets of the required application attachments using the checklist provided at the end of the TCEQ-20556 Project Application.



**TIP:** Please print application forms and required attachements single-sided.

- 6. Have the Authorized Official sign each copy of the TCEQ-20556 Project Application where indicated. Use the checklist provided at the end of the application to ensure that you have not missed any signature pages.
- 7. To complete Form 8, a qualified mechanic must assess the condition of the vehicle. By signing Form 8, the mechanic is certifying that the vehicle/engine is in good operating condition.
  - A qualified mechanic is someone whose occupation is repairing, maintaining, reassembling, and restoring the mechanical parts of motor vehicles, including engines, transmissions and suspension systems.
- 8. Submit two signed copies of the TCEQ-20556 Project Application and two sets of required attachments by the application deadline:

# Regular Mail:

Texas Commission on Environmental Quality Air Quality Division Implementation Grants Section (TCFP), MC-204 PO Box 13087 Austin, TX 78711-3087

### **Express Mail or Hand Delivery:**

Texas Commission on Environmental Quality Air Quality Division Implementation Grants Section (TCFP), MC-204 12100 Park 35 Circle Austin, TX 78753



**TIP:** Save your staples, clips, folders, and binders. Use a paperclip to secure each copy of the application packet.

### 4.0 HOW TO COMPLETE AN APPLICATION FORM



**TIP:** The application form is available in PDF only. The PDF allows you to fill out the forms electronically. You may also print the application and fill it out by hand.

### FORM 1 - APPLICANT INFORMATION

### Section 1 - Applicant Legal Name

The legal name of the applicant should be the name of the person or entity applying for a grant. The name entered into Section 1 should match:

- match the name listed on the IRS W-9 form;
- match the name of the owner listed on the vehicle title;
- correspond with the business information listed in Section 2 below; and
- should be the intended owner of the grant-funded vehicles.

# Section 2 - Business Information

**Ownership Code (Applicant Type).** Use the descriptions below to identify the applicant type. Select the applicable applicant type from the drop-down list.

- **Individual:** A person not owning a business. The applicant must provide a Social Security Number (SSN).
- **Sole Proprietor:** A person operating as a business that has not been incorporated. The applicant may be registered under an assumed name (commonly referred to as a DBA). The applicant must provide a SSN or Federal Employers Identification Number (FEIN) registered with the Texas Secretary of State (SOS).
- **Partnership:** A legal relationship that exists between two or more persons or other legal entities contractually associated as a business. The applicant must provide an FEIN registered with the Texas SOS.
- **Limited Partnership:** Partnership formed by two or more persons and having one or more general partners and one or more limited partners. The applicant must provide an FEIN registered with the Texas SOS.
- **Texas Corporation:** A profit or non-profit corporation chartered by the State of Texas. The applicant must provide an FEIN registered with the Texas SOS.
- **Professional Association:** An entity that provides a professional service requiring a state license, such as medical doctors and related professional organizations. The applicant must provide an FEIN registered with the Texas SOS.
- **Professional Corporation:** An entity that provides a professional service requiring a state license, other than those related to the practice of medicine. The applicant must provide an FEIN registered with the Texas SOS.
- **Out-of-State Corporation:** A profit or non-profit Corporation chartered by a governmental entity outside the state of Texas, with the right to transact business in the state of Texas. The applicant should have an 11-digit Texas Taxpayer Number active with the Texas Comptroller's Office and a Texas SOS File Number. The applicant must provide an FEIN.

- **State Agency/University:** Any Texas state agency or institution of higher education created by the Texas Legislature. The applicant must provide an FEIN. Does not include federal agencies or state agencies of other states.
- **Governmental Entity:** Any county or legal government agency not created by the Texas Legislature, such as city governments and federal agencies. Does not include Texas state agencies or institutions of higher education. The applicant must provide an FEIN.
- Other: Organizations not defined within one of the other ownership types; such as estates, or informal organizations not chartered by the Texas Secretary of State. The applicant must provide an FEIN.

**Payee Identification Number (PIN)** - Provide one of the numbers requested.

- **SSN:** If applying as an individual or sole proprietor, enter the applicant's Social Security Number (SSN).
- **FEIN:** If applying as a company or other entity, enter the FEIN.

**Does your business qualify as a TERP Small Business?** Skip this field for TCFP projects.

### Section 3 - Authorized Official

The Authorized Official is the applicant or an employee of the applicant authorized to sign for or speak on behalf of the entity. Provide the name, title, address, phone number, and email address of the Authorized Official. If different, provide both the mailing and physical address.

# Section 4 - Designated Project Representative

The designated project representative is the applicant or an employee of the applicant who will serve as the point of contact for this application. This person may not be a consultant, dealer, or subcontractor. Provide the name, title, address, phone number, and email address of the Designated Project Representative. If different, provide both the mailing and physical address.

Are the Authorized Official and Designated Project representative the same? If so, check the box and continue to Section 5.

# Section 5 - Designated Location for Records Access

Provide the physical address where the records for the grant-funded vehicle will be kept.

### FORM 2 - THIRD-PARTY PREPARER SIGNATURE PAGE

# Was the application prepared by a Third-Party Preparer? Select yes or no.

A Third-Party Preparer is someone who is assisting the applicant in the preparation of a grant application. A third-party may include consultants, dealers, or anyone who is not related to or a current employee of the applicant.

If YES is selected, the third-party preparer must complete and sign this form.



**TIP:**. It is still the applicant's responsibility to ensure that the information listed in the application is true and accurate.

#### FORM 3 - PROGRAM CERTIFICATIONS

Read the entire form. By signing the application, the Authorized Official is indicating that they understand and agree to the program-specific certifications.

# FORM 4 – CERTIFICATION OF ELIGIBILITY TO RECEIVE A STATE-FUNDED GRANT

All individuals or business entities, including sole ownerships, must complete this form regardless of whether child support obligations apply to the grant applicant.

- If box 1 is checked, you must fill in the individual's name and SSN.
- If box 2 is checked, you must provide the individuals' names and SSNs that own 25% or more of the business.
- If box 3 or 4 is checked, the Authorized Official is only required to initial and date the form.

Once the application has been printed, the Authorized Official must initial and date the form. Photocopies, stamps, or electronic signatures will not be accepted.

### FORM 5 - VEHICLE/EQUIPMENT INFORMATION

*Activity Number:* Enter the activity number.



TIP: Press the + sign in the upper right-hand corner to add additional activities (pages).

# Section 1- Vehicle/Equipment Information

Enter the following information for both the old and new vehicle. For the new vehice, you may enter "TBD" for the vehicle and engine identification number.

**Vehicle/Equipment Type:** Enter the type of vehicle (e.g., haul truck, dump truck, cement mixer, delivery van).

**Vehicle Identification Number (VIN):** Enter the Last 4 Digits of the VIN number of the vehicle.

Vehicle Make: Enter the name of the vehicle manufacturer.

**Vehicle Model or Model Number:** Enter the specific vehicle model name and/or number assigned by the manufacturer.

**Vehicle Model Year:** Enter the specification or model year for the vehicle.

**Gross Vehicle Weight Rating (GVWR):** The GVWR is the total allowable or recommended vehicle weight, including the loaded weight of the vehicle, driver, passengers, and cargo.

If the vehicle is normally operated in combination with a trailer, such as a tractor-trailer, enter the Gross Combined Weight Rating (GCWR).



TIP: The GCWR entered must match the gross combined weight authorized by the vehicle registration.

**Engine Make:** Enter the name of the engine manufacturer.

**Engine Model or Model Number:** Enter the specific engine model name and/or number assigned by the manufacturer.

**Engine Identification Number:** Enter the complete engine identification number listed on the engine block.

**Engine Model Year:** Enter the calendar year that the engine was manufactured.

**Fuel Type:** Enter the type of fuel powering the engine.

**Engine Family or Test Group Name/Code:** Enter the 12-character engine family code assigned by the Environmental Protection Agency and the California Air Resources Board to identify the engine for certification and compliance purposes.



TIP: Having trouble locating the engine family code? See if this helps: DOORS User Guide: Engine Family Names. If not, give us a call!

**Federal NO**<sub>x</sub> **Emissions:** Normally, an engine will be certified to meet the emission standard of the year in which the engine was manufactured. Please refer to the TCFP Technical Supplement for emission standards by engine manufacture year.

# Section 2- Historical Use of the Old Vehicle/Equipment

Enter the historical use information for the old vehicle.

**Miles (on-road vehicle):** Enter the average annual miles that the vehicle was operated over the last two years.

**Hours (non-road equipment):** Skip this field for TCFP Projects.

How many total miles/hours are indicated on the odometer/hour meter? Enter the current odometer reading for the vehicle.

**Is the odometer/hour meter working?** Select Yes or No from the drop-down menu.

# FORM 6 - VEHICLE/EQUIPMENT COST DATA

Activity Number: Enter the activity number.



TIP: Press the + sign in the upper right-hand corner to add additional activities (pages). Check the box in the upper left-hand corner if all of the activities in the application have the same cost data.

# Section 1 - Activity Cost Calculations

Enter the following cost data for the new vehicle:

**Capital Cost of New Vehicle/Engine (A):** Enter the invoice cost of the new vehicle, including taxes, duty, protective in transit insurance, and freight charges. The capital cost entered should match the primary price quote provided with the application.

**Additional Equipment Costs for Repower Projects (B):** Skip this field for TCFP projects.

**Installation Costs for Repower Projects (C):** Skip this field for TCFP Projects.

**Miscellaneous Supplies Costs for Repower Projects (D):** Skip this field for TCFP Projects.

Global Positioning System (E): The costs to purchase and install a Global Positioning System (GPS) to track and log the location and use of the vehicle may be included in the incremental costs. Ongoing operational and maintenance charges may not be included. The GPS system must be purchased from the TERP GPS Monitoring Service (TGMS) Contractor, Precision Tracking Solutions, Inc., authorized by and contracted with the TCEQ to provide the system. Refer to the TERP website www.terpgrants.org obtain the latest price and contact information, or you may contact them directly at 972-693-7006.

**Scrap Value (F):** Enter the default scrap value. The default scrap value is \$1,000.00 for replacement projects.

**Incremental Cost (G)**: The capital cost plus the GPS cost (if applicable), minus the scrap value equals the incremental cost.

**Other Financial Incentives and Tax Credits (H):** Enter the sum of any other financial incentives or tax credits that will be applied to the purchase of the new vehicle.

**Eligible Costs (I):** The grant recipient may be eligible for reimbursement of up to 80% of the incremental cost (0.8\*G) or the difference between the incremental cost and other financial incentives and tax credits (G-H), whichever is less.

**Requested Grant Amount (K):** Enter the requested grant amount for the activity.

Section 2 - Activity Completion: Has the replacement/repower been completed?

Indicate if the new vehicle has already been purchased (paid for and taken possession of) by marking yes or no.

### FORM 8 - VEHICLE/EQUIPMENT CERTIFICATION



TIP: Press the + sign in the upper right-hand corner to add additional activities (pages).

This form must be completed and signed by a mechanic qualified to assess the condition of the old vehicle/engine. The mechanic assessing the vehicle/engine may not be an employee of the applicant.

### FORM 9 - PERCENT ANNUAL USAGE



TIP: Press the + sign in the upper right-hand corner to add additional activities (pages). Check the box in the upper left-hand corner if all of the activities in the application have the same percent of annual usage within the elgible counties.

*Activity Number*: Enter the activity number.

**Percentage of Annual Use in Eligible Areas:** The applicant must commit to using the new vehicle at least 25%, 50% or 75% of the annual miles of operation in the eligible areas. Designate the percentage of total annual usage that will take place in one or more of the eligible areas for each activity.

**Business Description and/or Daily Route Description:** Use the space provided to describe the routine business operations of the new vehicle (e.g. gravel hauling) and the typical driving route including cities traveled to and highways/roadways travelled.

#### FORM 10 - SUMMARY PAGE

# Section 1 - Applicant Information

This information must match the information on Form 1: Applicant Information, Sections 1 and 2.

- **Applicant Legal Name:** The legal name of the grant applicant should be the name of the person/entity applying for a grant and should match the IRS W-9 form and vehicle title. The name that appears in Section 1 will be used for contracting purposes.
- **Applicant Type** Select from the drop down menu if you are an individual, Sole Ownership, Texas Liability Corporation, Government Entity, etc.
- **Primary Project Area** -Select the primary area of operation for the project from the drop-down menu. The primary area of operation is the area where the vehicle is operated the greatest amount of time.
- Emission Source -Select on-road from the drop down menu.
- **Incremental Cost of the Project** Enter the total incremental cost of the project.
- Requested Grant Amount Enter the total requested grant amount for the project.
- **Total Number of Activities** Enter the total number of activities included in this application.
- Activity Type Select Replacement from the drop down menu.
- Is the Applicant a TERP Small Business? Skip this field for TCFP Projects.
- Mailing Address This information must match the mailing address listed for the Authorized Official on Form 1: Applicant Information.
- **Printed Name of Authorized Official** Enter the name of the authorized official as it appears on Form 1: Applicant Information.
- **Authorized Official Title** Enter the title of the Authorized Official as it is listed on Form 1: Applicant Information.

Once the application has been printed, the Authorized Official must sign and date the form. Photocopies, stamps, or electronic signatures will not be accepted.

### Form 11: Fueling Infrastructure

Complete a separate Form 11 for each type of fuel being used by the new vehicles.

### Select a Fuel Type

Select the fuel type of the new vehicles from the drop-down list.

# Availability of Fueling Infrastructure and a Fuel Source

Mark the description that best describes the current availability of fueling infrastructure and a fuel source for the new vehicles.

Provide an explanation that describes the current availability of fueling infrastructure and a fuel source for the new vehicles.

### **CHECKLIST**

Review and complete this form to ensure that all appropriate forms are signed and all additional documents are included in the application packet.

Questions? We are here to help. Contact TERP staff at 1-800-919-TERP (8377).